

Application Data Sheet**Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: TENEBRIO ANTIFREEZE PROTEINS

Attorney Docket Number:: 016252-002110US

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 7

Small Entity?:: Yes

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Laurie
Middle Name:: A.
Family Name:: Graham
Name Suffix::
City of Residence:: Kingston, Ontario
State or Province of Residence::
Country of Residence:: Canada
Street of Mailing Address:: 31 Stanley Street, Apt. 13
City of Mailing Address:: Kingston, Ontario
State or Province of mailing address::
Country of mailing address:: Canada
Postal or Zip Code of mailing address:: K7K 1X8

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Yih-Cherng
Middle Name::
Family Name:: Liou
Name Suffix::
City of Residence:: Kingston, Ontario
State or Province of Residence::
Country of Residence:: Canada
Street of Mailing Address:: 15 MacPherson Avenue, Apt. 18-102
City of Mailing Address:: Kingston, Ontario
State or Province of mailing address::

Country of mailing address:: Canada
Postal or Zip Code of mailing address:: K7M 2W8

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Virginia
Middle Name:: K.
Family Name:: Walker
Name Suffix::
City of Residence:: Sydenham, Ontario
State or Province of Residence::
Country of Residence:: Canada
Street of Mailing Address:: R.R. #1
City of Mailing Address:: Sydenham, Ontario
State or Province of mailing address::
Country of mailing address:: Canada
Postal or Zip Code of mailing address:: K0H 2T0

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Peter
Middle Name:: L.
Family Name:: Davies
Name Suffix::
City of Residence:: Kingston, Ontario
State or Province of Residence::
Country of Residence:: Canada

Street of Mailing Address:: 100 Dickens Drive
City of Mailing Address:: Kingston, Ontario
State or Province of mailing address::
Country of mailing address:: Canada
Postal or Zip Code of mailing address:: K7M 2M8

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Designation:: Representative Number:: Representative Name::
Primary 31,677 Kenneth A. Weber

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing Date::
Divisional of 08/882,907 06/26/97

Foreign Priority Information

Country:: Application number:: Filing Date::

Assignee Information

Assignee Name:: Queen's University at Kingston
Street of mailing address::
City of mailing address:: Kingston
State or Province of mailing address:: Ontario
Country of mailing address:: Canada
Postal or Zip Code of mailing address:: K7L 3N6